

Port Orford-Langlois  
School District 2CJ

Code: **JECB-AR(3)**  
Adopted: 9/10/96  
Readopted: 6/8/04; 2/13/12

**Request for Nonresident Student Admission**  
(Consent by Nonresident District Only)

For Office Use Only

Student ID# \_\_\_\_\_

School Year \_\_\_\_\_

Nonresident District \_\_\_\_\_

Resident District \_\_\_\_\_

Legal Last Name \_\_\_\_\_ Legal First Name \_\_\_\_\_ Legal Middle Name \_\_\_\_\_

Street Address \_\_\_\_\_

Apartment Complex \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Enrolled Grade [2011-2012] \_\_\_\_\_

Primary Phone of Parent/Guardian \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Parent/Guardian Name (Person in Parental Relationship) \_\_\_\_\_

Is the student currently (as of April 1) under expulsion?  Yes  No

If yes, what was the reason: \_\_\_\_\_

Expelled from which district: \_\_\_\_\_

I hereby certify the information I have provided is true and I understand that falsely responding to any of the questions herein will result in denial and/or revocation of this application. If my child is admitted, I hereby authorize the release of the student educational records to [name of district] and certify that I am the parent or guardian in legal custody of the student.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

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Final Action of Nonresident District:  Approved  Denied  Wait list  Lottery number \_\_\_\_\_

Reason or comments: \_\_\_\_\_

Superintendent/Designee: \_\_\_\_\_ Date \_\_\_\_\_